CITY OF RENO

Quarterly Privileged License Renewal Application

LICENSE NUMBER: BUSINESS NAME: LICENSEE NAME: BUSINESS LOCATION: MAILING ADDRESS:	Q		15 DAYS AF Prepaid Rer	pay without penalty: FTER EXPIRATION newals are subject to in the event of rate	DATE o
Penalty will be as before next quar	payment must be receivessessed. License Fee and terly license will be issued underpayment of fees AD INSTRUCTIONS ON	d Penalty must both ed. The information s is also subject to t	be paid and entir you provide is sul he 50% penalty.	e form completed oject to audit. Any	
Charge	Description	Current Units	Fee Per Unit	Amount	

Charge Description	Current Units	Fee Per Unit	Amount
Bar		412.50	\$
Alcohol Manufacturing		247.50	\$
Adult Interactive Cabaret		550.00	\$
Add On Cabaret		137.50	\$
Alcohol Catering		275.00	\$
Auctioneer		210.00	\$
Brew Pub and Bar		660.00	\$
Beer Bar		165.00	\$
Brew Pub/Beer Bar		412.50	\$
Cabaret		550.00	\$
Dining Wine and Beer		165.00	\$
Dining Room Alcohol		412.50	\$
Escort Bureau		105.00	\$
Escort Independent Contractor		105.00	\$
Extra Bar		275.00	\$
Extra Bartender		27.50	\$
Fraternal Liquor		165.00	\$
Outcall Entertainer		105.00	\$
Outcall Entertainment Service		105.00	\$
Peddler Non Local		40.00	\$
Packaged Liquor		412.50	\$
Packaged Beer		137.50	\$
Peddler/Local		40.00	\$
Temporary Merchant		0.00	\$
Wholesale Liquor		412.50	\$
Wholesale Beer		247.50	\$

TOTAL – PRIVILEGED LICENSE FEES DUE (add subtotals)	\$
PENALTY (if paid after grace period, 50% of Fees Due)	\$
TOTAL AMOUNT DUE – Send check for this amount.	\$

Keep a copy of this form for your records.

INSTRUCTIONS

Please read before completing form.

- 1. Verify all printed information on reverse side, and make any changes or corrections as necessary.
- 2. Complete reverse side of form, filing in the number of items for each activity. Calculate the license fees due for each activity, and subtotal for each category.
- 3. Total the license fees for each category and enter in the spaces indicated.
- 4. Compute any penalty due and enter in the designated space on the reverse side.
- 5. Calculate Total Amount Due.
- 6. Complete remainder of form, sign, and date.
- 7. Mail completed form and check (be sure to include your account number on your check) for Total Amount Due to:

City of Reno **Business License Renewals One East First Street** PO Box 1900 Reno, NV 89505

BUSINESS STATUS:	
Federal Tax Identification Number (EIN or	SSN) :
Business has been sold. Date sold:	·
Name and Address of new owner:	
No longer in business in Reno. Date out of	
U	rs, new locations, mailing address, phone numbers, etc). low or on an attached sheet and mail in with this form, or 1-2090 to obtain the proper forms.
	CERTIFICATION
I hereby declare this application has been exhausted and belief is true and correct.	examined by me as of this date and to the best of my
Licensee Signature	Date
Title	Phone

or